

ECS/EMD Configuration Change Request

Page 1 of 2 Page(s)

1. Originator Joan H. Schessler	2. Log Date: 03/11/2005	3. CCR #: 05-0102	4. Rev:	5. Tel: 301.925.0426	6. Rm #: 3068C	7. Org. SEIT
8. CCR Title: Update Criteria in OD_S5_01						
9. Originator Signature/Date Joan H. Schessler /s/ 03/11/2005			10. Class II	11. Type: CCR	12. Need Date: 3/15/05	
13. CCR Sponsor Signature/Date Evelyn N. Nakamura /s/ 03/11/2005			14. Category of Change: VDB		15. Priority: (If "Emergency" fill in Block 27). Routine	
16. Documentation/Drawings Impacted (Review and submit checklist): N/A			17. Schedule Impact: N/A		18. CI(s) Affected: OD_S5_012	
19. Release Affected by this Change: N/A		20. Date due to Customer: N/A		21. Estimated Cost: None - Under 100K		
22. Source Reference: <input type="checkbox"/> NCR (attach) <input type="checkbox"/> Action Item <input type="checkbox"/> Tech Ref. <input type="checkbox"/> GSFC <input type="checkbox"/> Other:						
23. Problem: (use additional Sheets if necessary) See sheet 2						
24. Proposed Solution: (use additional sheets if necessary) Implement changes in attached file of Ticket OD_S5_01, Integrate Physical Media Distribution Into OMS.						
25. Alternate Solution: (use additional sheets if necessary)						
26. Consequences if Change(s) are not approved: (use additional sheets if necessary)						
27. Justification for Emergency (If Block 15 is "Emergency"):						
28. Site(s) Affected: <input type="checkbox"/> EDF <input type="checkbox"/> PVC <input type="checkbox"/> VATC <input type="checkbox"/> EDC <input type="checkbox"/> GSFC <input type="checkbox"/> LaRC <input type="checkbox"/> NSIDC <input type="checkbox"/> SMC <input type="checkbox"/> AK <input type="checkbox"/> JPL <input type="checkbox"/> EOC <input type="checkbox"/> IDG Test Cell <input type="checkbox"/> Other						
29. Board Comments:				30. Work Assigned To:	31. CCR Closed Date:	
32. SCDV CCB Chair (Sign/Date): Byron V. Peters /s/ 03/17/2005			Disposition: Approved App/Com. Disapproved Withdraw Fwd/ESDIS ERB Fwd/ECS			
33. EDF CCB Chair (Sign/Date):			Disposition: Approved App/Com. Disapproved Withdraw Fwd/ESDIS ERB Fwd/ECS			
34. ECS CCB Chair (Sign/Date):			Disposition: Approved App/Com. Disapproved Withdraw Fwd/ESDIS ERB Fwd/ESDIS			

ADDITIONAL SHEET

CCR #: 05-0102 **Rev:** **Originator:** Joan H. Schessler

Telephone: 301.925.0426 **Office:** SEIT

Title of Change: Update Criteria in OD_S5_01

Criteria 210, 240, 242, 250, 252, 279, 275. The OM server is not involved in a number of interventions that are the direct result of GUI actions. As a result, these interventions are not logged by the server (as per S-OMS-12710k). In accordance, the corresponding verification of the OM server log entries was removed from the criteria that test such situations. (The log is not needed since the occurrence of the event is documented by the intervention itself)

Criterion 270 that tests QC mistakenly refers to media creation error (rather than media verification error).

Criterion 630: Cancellation must result in a closed operator intervention documenting the cancellation. A corresponding verification was added to the criterion.

CM01AJA00 Revised 10/2/03

ECS/EMD